

Receipt

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

FILE COPY

In re the application of)

Daniel J. Melchione)

Application No. 09/585,811)

Filed: May 31, 2000)

For: SYSTEM, METHOD AND COMPUTER)
PROGRAM PRODUCT FOR PROCESS-BASED)
SELECTION OF VIRUS DETECTION ACTIONS)

Examiner: Unassigned

Art Unit: 2785

Date: September 13, 2000

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, DC 20231 on September 13, 2000.

Signed: 

Julie A. Curtis

REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231

Sir:

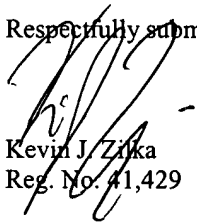
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Enclosed is a copy of the Filing Receipt for the above-identified patent application. Please reprint the Filing Receipt as follows and mail the corrected copy to the undersigned.

Change the name of the inventor from "DANIEL JOSEPH MCLCHIONC" to
-- DANIEL JOSEPH MELCHIONE--.

Because this is a Patent Office typographical error, no fee should be due. However, the Commissioner is authorized to charge any fees that may be due to Deposit Account 50-1351 (Order No. NAI1P004/00.006.01).

Respectfully submitted,


Kevin J. Zilka
Reg. No. 41,429

P.O. Box 721030
San Jose, CA 95172-1030
(408) 505-5100

Attorney Docket No. NAI1P004/00.006.01

FILING RECEIPT

OC00000005324654

**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**Address: ASSISTANT SECRETARY AND
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/585,811	05/31/2000	2785	864	NAI11P004/00.006.01	4	21	5

Kevin J Zilka
P O Box 721030
San Jose, CA 95172

Date Mailed: 08/15/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)Daniel Joseph Melchione, Beaverton, OR ;
MELCHIONE**Continuing Data as Claimed by Applicant****Foreign Applications**

If Required, Foreign Filing License Granted 08/15/2000

Title

System, method and computer program product for process-based selection of virus detection actions

Preliminary Class

714

Data entry by : COUPLIN, JACQUELINE

Team : OIPE

Date: 08/15/2000





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Bib Data Sheet

SERIAL NUMBER 09/585,811	FILING DATE 05/31/2000 RULE -	CLASS 714	GROUP ART UNIT 2785	ATTORNEY DOCKET NO. NAI11P004/00.006.01
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APPLICANTS

Daniel Joseph Melchione, Beaverton, OR ;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 08/15/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OR	SHEETS DRAWING 4	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 5
Verified and Acknowledged Examiner's Signature _____ Initials _____					

ADDRESS

Kevin J Zilka
P O Box 721030
San Jose ,CA 95172

TITLE

System, method and computer program product for process-based selection of virus detection actions

FILING FEE RECEIVED 864	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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